



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 8826

|   |   |                               |   |   |
|---|---|-------------------------------|---|---|
| <b>SERIAL NUMBER</b><br>10/535,523  | <b>FILING OR 371(c) DATE</b><br>03/24/2006<br><b>RULE</b>   | <b>CLASS</b><br>435           | <b>GROUP ART UNIT</b><br>1648   | <b>ATTORNEY DOCKET NO.</b><br>6395-66741-06 |
| <b>APPLICANTS</b><br>Thomas W Hodge, Roswell, GA;<br>Natalie J McDonald, Atlanta, GA;<br>Michael W Shaw, Decatur, GA;<br>Donald H Rubin, Nashville, TN;<br>Anthony Sanchez, Lilburn, GA;  |   |                               |   |   |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/US03/37143 11/18/2003 which claims benefit of 60/427,464 11/18/2002 and claims benefit of 60/482,604 06/25/2003   |   |                               |   |   |
| <b>** FOREIGN APPLICATIONS *****</b>  |   |                               |   |   |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>GA | <b>SHEETS DRAWING</b>   | <b>TOTAL CLAIMS</b><br>57                   |
| <b>INDEPENDENT CLAIMS</b><br>10   |   |                               |   |   |
| <b>ADDRESS</b><br>46135   |   |                               |   |   |
| <b>TITLE</b><br>Cell lines and host nucleic acid sequences related to infectious disease  |   |                               |   |   |
| <b>FILING FEE RECEIVED</b><br>3980  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |